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ABSTRACT

Treatment is one component of a strategy to reduce substance abuse. It can include detoxification; inpatient counseling; outpatient counseling; therapeutic communities; and self help groups. Referrals can take place in settings such as emergency rooms; employee assistance programs; churches; and physicians' offices. Unmet treatment needs can cause other social problems such as crime, gang violence, and decreased productivity in the workplace. People seek treatment because of a variety of drugs, but alcohol leads all other substances as the cause of drug admissions. This paper provides a description of the 13 principles of effective treatment for substance abuse. Information is also provided on national organizations, publications, and names of community leaders with expertise in the treatment area to assist health workers in understanding the treatment needs in their community. (Contains 15 resources.) (JDM)

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TREATMENT

Technical Assistance Packet

Join Together:
A National Resource for Communities Fighting Substance Abuse and Gun Violence

www.jointogether.org

April 2000

ED 456 356

Description of the Issue

Treatment is one component of a strategy to reduce substance abuse. It should be available to all who request it. Treatment can include detoxification, inpatient counseling, outpatient counseling, therapeutic communities, residential communities, self-help groups and aftercare. Referral to treatment can take place in various settings such as emergency rooms, hospitals, employee assistance programs, churches, agencies, and physicians' offices. This is also known as a brief intervention where these short, problem-specific approaches can be valuable in the treatment of substance abuse problems. They provide the opportunity for clinicians to increase positive outcomes by asking a series of questions to determine if a referral to treatment is needed. It is estimated that 9,383,000 persons needed substance abuse treatment in 1996 according to the Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-1996. Research shows that unmet treatment needs can cause other societal problems like crime, gang violence in our neighborhoods, decreased productivity in our workplaces, drunk driving crashes on our roads, more hospital emergency room visits in our communities and higher health care costs. Nationally, the cost of untreated addiction runs as high as $172 billion a year, yet dollars directed to prevention and treatment equal less than one percent of this amount, according to researchers at Rutgers University.

People seek treatment for a variety of drugs including alcohol and opiates. Opiates, such as heroin account for 16 percent of the 1.5 million treatment admissions that were reported by the states to the Substance Abuse and Mental Health Services Administration in 1997. Alcohol continues to lead all other substances as the cause for treatment admissions. Almost half, or 48 percent, of treatment admissions in 1997 were for alcohol abuse, with 44 percent of these alcohol admissions involving another substance as well.

Principles of Effective Treatment from *Principles of Drug Addiction Treatment – A Research Based Guide(NIDA)*

1. No single treatment is appropriate for all individuals. Matching treatment settings, interventions, and services to each individual's particular problems and needs is critical to his or her ultimate success in returning to productive functioning in the family, workplace, and society.

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2. Treatment needs to be readily available. Because individuals who are addicted to drugs may be uncertain about entering treatment, taking advantage of opportunities when they are ready for treatment is crucial. Potential treatment applicants can be lost if treatment is not immediately available or is not readily accessible.

3. Effective treatment attends to multiple needs of the individual, not just his or her drug use. To be effective, treatment must address the individual's drug use and any associated medical, psychological, social, vocational, and legal problems.

4. An individual's treatment and services plan must be assessed continually and modified as necessary to ensure that the plan meets the person's changing needs. A patient may require varying combinations of services and treatment components during the course of treatment and recovery. In addition to counseling or psychotherapy, a patient at times may require medication, other medical services, family therapy, parenting instruction, vocational rehabilitation, and social and legal services. It is critical that the treatment approach be appropriate to the individual's age, gender, ethnicity, and culture.

5. Remaining in treatment for an adequate period of time is critical for treatment effectiveness. The appropriate duration for an individual depends on his or her problems and needs. Research indicates that for most patients, the threshold of significant improvement is reached at about 3 months in treatment. After this threshold is reached, additional treatment can produce further progress toward recovery. Because people often leave treatment prematurely, programs should include strategies to engage and keep patients in treatment.

6. Counseling (individual and/or group) and other behavioral therapies are critical components of effective treatment for addiction. In therapy, patients address issues of motivation, build skills to resist drug use, replace drug-using activities with constructive and rewarding nondrug-using activities, and improve problem-solving abilities. Behavioral therapy also facilitates interpersonal relationships and the individual's ability to function in the family and community.

7. Medications are an important element of treatment for many patients, especially when combined with counseling and other behavioral therapies. Methadone and levo-alpha-acetylmethadol (LAAM) are very effective in helping individuals addicted to heroin or other opiates stabilize their lives and reduce their illicit drug use. Naltrexone is also an effective medication for some opiate addicts and some patients with co-occurring alcohol dependence. For persons addicted to nicotine, a nicotine replacement product (such as patches or gum) or an oral medication (such as bupropion) can be an effective component of treatment. For patients with mental disorders, both behavioral treatments and medications can be critically important.

8. Addicted or drug-abusing individuals with coexisting mental disorders should have both disorders treated in an integrated way. Because addictive disorders and mental disorders often occur in the same individual, patients presenting for either condition should be assessed and treated for the co-occurrence of the other type of disorder.

9. Medical detoxification is only the first stage of addiction treatment and by itself does little to change long-term drug use. Medical detoxification safely manages the acute physical symptoms of withdrawal associated with stopping drug use. While detoxification alone is rarely sufficient to help addicts achieve long-term abstinence, for some individuals it is a strongly indicated precursor to effective drug addiction treatment

10. Treatment does not need to be voluntary to be effective. Strong motivation can facilitate the treatment process. Sanctions or enticements in the family, employment setting, or criminal justice system can increase significantly both treatment entry and retention rates and the success of drug treatment interventions.

11. Possible drug use during treatment must be monitored continuously. Lapses to drug use can occur during treatment. The objective monitoring of a patient's drug and alcohol use during treatment, such as through urinalysis or other tests, can help the patient withstand urges to use drugs. Such monitoring also can provide early evidence of drug use so that the individual's treatment plan can be adjusted. Feedback to patients who test positive for illicit drug use is an important element of monitoring.

12. Treatment programs should provide assessment for HIV/AIDS, hepatitis B and C, tuberculosis and other infectious diseases, and counseling to help patients modify or change behaviors that place themselves or others at risk of infection. Counseling can help patients avoid high-risk behavior. Counseling also can help people who are already infected manage their illness.

13. Recovery from drug addiction can be a long-term process and frequently requires multiple episodes of treatment. As with other chronic illnesses, relapses to drug use can occur during or after successful treatment episodes. Addicted individuals may require prolonged treatment and multiple episodes of treatment to achieve long-term abstinence and fully restored functioning. Participation in self-help support programs during and following treatment often is helpful in maintaining abstinence.

What follows is a list of national organizations, publications, community leaders with an expertise in the treatment area and community stories. We hope that this information will assist you as you try to understand treatment needs in your community.

National Organizations

Addiction Technology Transfer Center Network (ATTC)
ATTC is a nationwide, multi-disciplinary resource that draws upon the knowledge, experience and latest work of recognized experts in the field of addictions launched by the Center for Substance Abuse Treatment (CSAT). The Network is comprised of 13 independent Regional Centers and a National Office. Training, publications and online course information is available on their website, www.nattc.org/.
University of Missouri-Kansas City, 5100 Rockhill Road; Kansas City, MO 64110-2499; Tel: 816-482-1146; Fax: 816-482-1101; Eml: no@nattc.org

Center for Substance Abuse Treatment (CSAT)
CSAT funds and collaborates with private and public treatment providers to develop and support policies, approaches and programs for individuals who abuse alcohol and other drugs. Information is disseminated through CSAT by Fax which may be accessed by email, CESAR@cesar.umd.edu or by website, www.bsos.umd.edu/cesar/html. Publications on a variety of aspects of treatment are available from the National Clearinghouse on Alcohol and Drug Information (NCADI) at 800-729-6686 or www.health.org.
5600 Fishers Lane, Rockville II Building, Rockville, MD 20857; Tel: 301-443-2467; www.samhsa.gov/csat/csat.htm

Department of Veterans Affairs (VA)
The VA is one of the nation's largest treatment agencies. Their Substance Abuse Residential Rehabilitation Program, SARRTP, has 22 systems nationwide. This program targets veterans with substance abuse disorders. For more information about how to utilize the resources of the VA in your community, call 1-800-827-1000 or go to their website at www.va.gov/.

National Institute on Alcohol Abuse and Alcoholism (NIAAA)
NIAAA supports and conducts biomedical and behavioral research on the causes, consequences, treatment, and prevention of alcoholism and alcohol-related problems. NIAAA offers materials, consultation, coordination and professional workshops.
6000 Executive Boulevard, Willco Building, Bethesda, MD 20892-7003; Tel: 301-443-3860; www.niaaa.nih.gov/

National Institute of Drug Abuse (NIDA)
NIDA provides and supports research and information about drug abuse and addiction and supports research of theory-based prevention interventions. NIDA offers workshops, conferences and materials.
National Institutes of Health, 6001 Executive Boulevard, Room 5213, Bethesda, MD 20892; Tel: 301-443-1124; www.nida.nih.gov/NIDAHome2.html

SMART Recovery
SMART Recovery is an abstinence-based, not-for-profit organization with a self-help program for people having problems with drinking and using. Their website offers information and meetings about recovering from alcohol and drug abuse.
24000 Mercantile Road, Suite 11, Beachwood, OH 44122; Tel: 216-292-0220; Fax: 216-831-3776; Eml: srmail1@aol.com

Therapeutic Communities of America (TCA)
TCA is an association of substance abuse treatment organizations working together to promote the understanding of the self help therapeutic community (TC) methodology for the treatment of drug and alcohol abuse. TCA offers an online newsletter as well as publications for a cost.
1611 Connecticut Ave., N.W., Suite 4-B, Washington, D.C. 20009; Tel: 202-296-3503; www.tcanet.org/

The Salvation Army
The Salvation Army Adult Rehabilitation Centers comprise the largest resident substance abuse rehabilitation program in the United States. There are 125 centers nationwide.
615 Slaters Lane, P.O. Box 269, Alexandria, VA 22313; Tel: 703-684-5500; Fax: 703-684-3478; www.salvationarmyusa.org/home.htm

Publications and How to Order Them

The publications listed here are both free and of modest cost.

- *Principles of Drug Addiction Treatment – A Research Based Guide*
  This guide provides research-based information about addiction, drug treatment, and recovery of new patients in drug treatment and for their friends and families. In addition, it helps guide new patients in getting the most out of their treatment and forewarns them about possible difficulties during treatment and recovery.
  National Institute on Drug Abuse, National Institutes of Health, 6001 Executive Boulevard, Room 5213, Bethesda, MD 20892; Tel: 800-729-6686; www.nida.nih.gov/NIDAHome2.html

  Other publications by NIDA include:
  - Therapy Manuals for Drug Addiction ---- A Community Reinforcement Plus Vouchers Approach: Treating Cocaine Addiction
  - Therapy Manuals for Drug Addiction ---- A Cognitive-Behavioral Approach: Treating Cocaine Addiction

- *Treatment for Addiction - Advancing the Common Good*
  Recommendations from a Join Together Policy Panel on Treatment and Recovery
  Join Together, 441 Stuart Street, 7th Floor, Boston, MA 02116; Tel: 617-437-1500; Fax: 617-437-9394; info@jointogether.org or you can download it at www.jointogether.org/sa/files/pdf/JTAdvanc.pdf.

  Other Join Together publications related to treatment include:
  - Campaign for Treatment: Educating Our Legislators, 1998/1999
  - Expanding Treatment in Your Community, 1998
  - Providing Substance Abuse Treatment Reduces Crime, 1996
  - Summer 1999 Join Together Newsletter
  - Fall 1998 Join Together Newsletter
  - Health Reform for Communities Policy Panel Report
  - Fixing a Failing System Policy Panel Report

- *Evaluating Recovery Services: The California Drug and Alcohol Treatment Assessment* (CALDATA), 1994.
  The Department of Alcohol and Drug Programs, 1700 K Street, Sacramento, CA 95814; Tel: 916-327-3728; www.adp.cahwnet.gov/pdf/caldata.pdf

- *Investment in Treatment for Alcohol and Other Drug Problems: It Pays*
  NASADAD, 808-17th Street NW, Suite 410, Washington, DC 20006; Tel: 202-293-0090; Fax: 202-293-1250; www.nasadad.org/

- *Fighting for Parity in An Age of Incremental Health Care Reform*
  Vermont's Successful Campaign for Mental Health and Substance Abuse Parity
  The Vermont Association for Mental Health, Ken Libertoff, P.O. Box 165, Montpelier, VT 05601; Tel: 802-223-6263

- *Premium Estimates for Substance Abuse Parity Provisions for Commercial Health Insurance*
  Rutgers Center of Alcohol Studies, 607 Allison Road, Piscataway, NJ 08854-8001; Tel: 732-445-3568; Fax: 732-445-3500

Community Leaders

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Community Stories:

Stories listed below are reprinted from Join Together Online. Similar stories can be found at www.jointogether.org.

Recovery Community Support Programs (RCSP) were funded by the Center for Substance Abuse Treatment to foster the participation of persons in recovery, their families, and other allies in the development of substance abuse treatment policies, programs, and quality assurance activities at the state, regional, and local levels. Nineteen communities were funded in 1998. More information can be found at www.treatment.org/Topics/rcsp.htm or by contacting Cathy Nugent at 301-443-2662.

San Antonio, Texas Fighting Back Helps Expand Treatment Options For Residents
Accessible substance abuse treatment has been a real problem for the 200,000 residents in the Fighting Back target area of San Antonio. The absence of treatment facilities in this neighborhood meant that those who wanted treatment had to travel beyond the 25 square miles of the Fighting Back target area to obtain the services they needed. Now thanks to the collaborative efforts of all the parties of San Antonio Fighting Back, there are four new programs, which treat substance abuse and mental illnesses, as well as the neighborhood's first-ever detoxification center within walking distance.

Getting residents to support the presence of these new treatment programs was not easy. Many people did not want treatment facilities in their neighborhood. The effort required extensive community education and mobilization to inform the community about the importance and benefits of having treatment easily available for individuals and for family participation. Residents had to understand that the centers were crucial to reducing local substance abuse problems and improving the health and safety of the area.

The Alamo Area Association for the Prevention and Treatment of Addiction (AAAPTA), a local network formed by Fighting Back, has provided guidance for achieving the objective of making substance abuse treatment available to all who need it. AAAPTA also assists in collecting and analyzing data and statistics on the effectiveness of substance abuse treatment for the San Antonio Fighting Back project. Future goals include expanding access to treatment for adolescents. San Antonio presently has no detoxification for indigent adolescents. You can find more information at www.fightingback.org/ or by contacting Jennifer Richardson at 210-533-6592.

Offering substance abuse treatment services not only benefits clients, it can save money too was what the **Vallejo, CA Fighting Back Partnership** learned when they joined together with Kaiser Permanente to provide a substance abuse benefit to all of Kaiser's subscribers in Vallejo and Sacramento, including recipients of Medi-Cal. (Medi-Cal is California's version of Medicaid.) In addition to offering clients coverage for substance abuse treatment, the Vallejo Partnership is working to assure that substance abusers receive treatment by aggressively training community leaders on how to identify the signs and symptoms of substance abuse. Contact Jane Callahan at 707-648-5230.